



PTO/SB/21 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | |
|---|------------------------|-----------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/824,926 |
| | Filing Date | April 14, 2004 |
| | First Named Inventor | Hideharu Tajima |
| | Art Unit | 2627 |
| | Examiner Name | K. Shen |
| Total Number of Pages in This Submission | Attorney Docket Number | 61144RCE(70904) |

ENCLOSURES (Check all that apply)

| | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Exhibit I through Exhibit IV Charge \$670.00 to deposit account 04-1105 Certificate of Express Mailing (1 page) Return Receipt Postcard |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|-----------------------------------|----------|--------|
| Firm Name | EDWARDS ANGELL PALMER & DODGE LLP | | |
| Signature | | | |
| Printed name | David A. Tucker | | |
| Date | August 16, 2010 | Reg. No. | 27,840 |



Application No. (if known): 10/824,926

Attorney Docket No.: 61144RCE(70904)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM311676577US in an envelope addressed to:

MS Appeal Brief - Patents
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on August 16, 2010
Date

Signature

Dawn E. Grimes

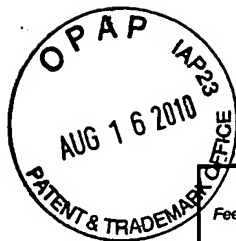
Typed or printed name of person signing Certificate

Registration Number, if applicable

(617) 517-5534
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

One Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages)
Appeal Brief Transmittal (1 page)
Appeal Brief (58 pages)
Exhibit I through Exhibit IV
Fee Transmittal (2 pages)
Charge \$670.00 to deposit account 04-1105
Return Receipt Postcard



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

| | | | | |
|---|--|--------------------------|----------------------|-----------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009 | | Complete if Known | | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 10/824,926 | |
| TOTAL AMOUNT OF PAYMENT | | Filing Date | April 14, 2004 | |
| (\$) | | 670.00 | First Named Inventor | Hideharu Tajima |
| | | Examiner Name | K. Shen | |
| | | Art Unit | 2627 | |
| | | Attorney Docket No. | 61144RCE(70904) | |

| | | | | |
|--|---|--------------------------------------|---|---|
| METHOD OF PAYMENT (check all that apply) | | | | |
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): |
| <input checked="" type="checkbox"/> Deposit Account | Deposit Account Number: 04-1105 | | Deposit Account Name: Edwards Angell Palmer & Dodge LLP | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments | | | |

| | | | | | | | |
|---|--------------------|---------------------|---|----------------------|----------------------------------|-----------------------|-----------------------|
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
| | | Small Entity | | Small Entity | | Small Entity | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid (\$) |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEES | | | | | | | |
| | | | | | | Small Entity | |
| Fee Description | | | | | | Fee (\$) | Fee (\$) |
| Each claim over 20 (including Reissues) | | | | | | 52 | 26 |
| Each independent claim over 3 (including Reissues) | | | | | | 220 | 110 |
| Multiple dependent claims | | | | | | 390 | 195 |
| Total Claims | | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | | |
| - 20 or HP | | x | = | | Fee (\$) | Fee Paid (\$) | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| Indep. Claims | | Extra Claims | Fee (\$) | Fee Paid (\$) | | | |
| - 4 or HP | | x | = | | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets | | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | | |
| - 100 = | | /50 = | (round up to a whole number) x | = | | | |
| 4. OTHER FEE(S) | | | | | | | |
| | | | | | | Fees Paid (\$) | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month | | | | | | 130.00 | |
| 1402 Filing a brief in support of an appeal | | | | | | 540.00 | |

| | | | | | |
|---------------------|-----------------|-----------------------------------|-----------------|-----------|----------------|
| SUBMITTED BY | | | | | |
| Signature | | Registration No. (Attorney/Agent) | 27,840 | Telephone | (617) 517-5508 |
| Name (Print/Type) | David A. Tucker | Date | August 16, 2010 | | |



COPY

PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number

| | | | | |
|--|----------|--------------------------|---------------------|-----------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009 | | Complete if Known | | |
| | | Application Number | 10/824,926 | |
| | | Filing Date | April 14, 2004 | |
| | | First Named Inventor | Hideharu Tajima | |
| | | Examiner Name | K. Shen | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | Art Unit | 2627 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) | 670.00 | Attorney Docket No. | 61144RCE(70904) |

METHOD OF PAYMENT (check all that apply)

| | | | | |
|--|---|--------------------------------------|-------------------------------|---|
| <input type="checkbox"/> Check | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account | Deposit Account Number: | 04-1105 | Deposit Account Name: | Edwards Angell Palmer & Dodge LLP |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | | | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments | | | |

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 52 | 26 |
| Each independent claim over 3 (including Reissues) | 220 | 110 |
| Multiple dependent claims | 390 | 195 |

| | | | | |
|--|---------------------|-----------------|----------------------|--------------------------------------|
| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
| - 20 or HP | x | = | | Fee (\$) Fee Paid (\$) |
| HP = highest number of total claims paid for, if greater than 20. | | | | |
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | |
| - 4 or HP | x | = | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | /50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

| | Fees Paid (\$) |
|---|----------------|
| Non-English Specification, \$130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month | 130.00 |
| 1402 Filing a brief in support of an appeal | 540.00 |

| | | | |
|---------------------|------------------------|-----------------------------------|-----------------|
| SUBMITTED BY | | | |
| Signature | <i>David A. Tucker</i> | Registration No. (Attorney/Agent) | 27,840 |
| Name (Print/Type) | David A. Tucker | Telephone | (617) 517-5508 |
| | | Date | August 16, 2010 |